Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

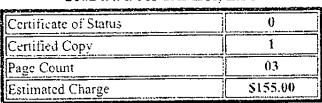
Account Number : I20000000146

Phone : (305)444-4994 Fax Number : (305)444-4977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:__

FLORIDA LIMITED LIABILITY CO. 2102 SOUTH TAMPA, LLC



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Electronic Filing Menu Corporate Filing Menu

Help

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2102 South Tarn	pa, LLC
(Must end with the words "Limited Liab	lity Company, "L.L.C.," or "LLC.")
E II - Address: g address and street address of the principal office of	
Principal Office Address:	Mailing Address:
8200 - 113th St., Suite 103	8200 - 113th St., Suite 103
Seminole, FL 33772	Seminole, FL 33772

The name and the Florida street address of the registered agent are:

CP.A	Partners, LLC	
	Name	
8200 - 113th St., St	rite 103	
Florida street address	(P.O. Box <u>NOT</u> a	cceptable)
Seminole	FL	33772
City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my diales, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

CPA Partners, LLC
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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Tide:		Name and Address:
"AMBR" = Aut "MGR" = Mana	horized Member neer	
AMBR		Level Up Holdings, LLC
		Vilmington, DE 19801
		William Coll, DE 17001
		
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